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Application Number	10/759,081
Filing Date	01/20/2004
First Named Inventor	Chou H. Li
Art Unit	2815
Examiner Name	Kraig, William
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: Reg. No. 24,925

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number: 1 Oak Bend Road
West Orange, NJ 07052

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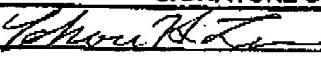
<input checked="" type="checkbox"/> Firm or Individual Name	Chou H. Li, REG. No. 24,925		
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Chou H. Li		
Date	April 6, 2007	Telephone	973-669-5659

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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